## **PATENT APPLICATION FEE DETERMINATION RECORD**

Effective October 1, 2001

Application or Docket Number

10 04 3109

| CLAIMS AS FILED - PART I<br>(Column 1)  |  |   |                    |              |                              | (Column 2)       |          | SMALL ENTITY TYPE |                        | OR    | OTHER THAN OR SMALL ENTITY |                        |
|---|--|---|--------------------|--------------|------------------------------|------------------|----------|-------------------|------------------------|-------|----------------------------|------------------------|
| TOTAL CLAIMS  |  |   | 8                  |              |                              |                  | ſ        | RATE              | FEE                    |       | RATE                       | FEE                    |
| FOR   |  |   | NUMBER FILED       |              | NUMBI                        | ER EXTRA         |          | BASIC FEE         | 370.00                 | OR    | BASIC FEE                  | 740.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | <b>Q</b> minus 20= |              | •                            |                  |          | X\$ 9=            |                        | OR    | X\$18=                     |                        |
| INDEPENDENT CLAIMS  |  |   | ) minus 3 =        |              | *                            |                  |          | X42=              |                        | OR    | X84=                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |                    |              |                              |                  |          | +140=             |                        | OR    | +280=                      | , ( )                  |
| * If the difference in column 1 is less than zero, enter  |  |   |                    |              | r "0" in c                   | olumn 2          |          | TOTAL             |                        | OR    | TOTAL                      |                        |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column   |  |   |                    |              |                              |                  | Ĺ        | SMALL             | ENTITY                 | OR    | OTHER<br>SMALL I           |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                    | NUM<br>PREVI | IEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |          | RATE              | ADDI-<br>TIONAL<br>FEE |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | . 7                                       | Minus              | ** 6         | 20                           | =                |          | X\$ 9=            |                        | OR    | X\$18=                     |                        |
|   | Independent                                    | *   | Minus              | ***          | 5                            | -                | 4        | X42=              |                        | OR    | X84=                       |                        |
| H   | FIRST PRESE                                    | NTATION OF M                              | OLTIPLE DEP        | ENDEN        | CLAIM                        |                  | <b>J</b> | +140=             |                        | OR    | +280=                      |                        |
|   |  |   |                    |              |                              |                  |          |                   |                        | OR    | TOTAL<br>ADDIT. FEE        |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |                    |              |                              |                  |          |                   |                        |       |                            |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                    | NUM<br>PREVI | HEST<br>1BER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |          | RATE              | ADDI-<br>TIONAL<br>FEE |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus              | ##           |                              | =                |          | X\$ 9=            |                        | OR    | X\$18=                     |                        |
|   | Independent                                    | *   | Minus              | ***          |                              | =                |          | X42=              |                        | OR    | X84=                       | 4.5                    |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                    |              |                              |                  | ] ل      | +140=             |                        | OR    | +280=                      |                        |
| . TOTAL ADDIT. FEE  |  |   |                    |              |                              |                  |          |                   |                        | OR    | TOTAL<br>ADDIT, FEE        |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |                    |              |                              |                  |          |                   |                        |       |                            |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                    | NUN<br>PREVI | HEST<br>1BER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |          | RATE              | ADDI-<br>TIONAL<br>FEE |       | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus              | **           |                              | =                |          | X\$ 9=            |                        | OR    | X\$18=                     |                        |
|   | Independent                                    | *   | Minus              | ***          |                              | ]=               | 41       | X42≃              |                        | OR    | X84=                       |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                    |              |                              |                  |          | +140=             |                        | OR    | +280=                      |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |                    |              |                              |                  |          |                   | OR                     | TOTAL |                            |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                    |              |                              |                  |          |                   |                        |       |                            |                        |
|   |  | ,   |                    |              |                              |                  |          |                   |                        |       |                            |                        |